

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

| | | |
|--|---|--|
| PLAINTIFF UNITED STATES OF AMERICA | | COURT CASE NUMBER C.A. 98-129 E |
| DEFENDANT REAL PROPERTY KNOWN AND NUMBERED AS 902 EAST 21ST STREET, ET AL. | | TYPE OF PROCESS DISPOSITION |
| SERVE AT | NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN SEE BELOW PITTSBURGH PA. | |
| | ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) | |
| SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW | | |
| MARY MCKEEN HOUGHTON ASSISTANT U.S. ATTORNEY 700 GRANT STREET, SUITE 400 PITTSBURGH, PA 15219 (412) 894-7370 | | |
| Number of process to be served with this Form 285 | | 2006 OCT 18 10:01 AM 10:01 AM 10:01 AM |
| Number of parties to be served in this case | | |
| Check for service on U.S.A. | | |

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

PURSUANT TO THE ATTACHED MOTION AND ORDER OF COURT DATED MAY 22, 2006, WHICH DIVESTS ALL RIGHT, TITLE AND INTEREST OF JENNIFER BROSTMAYER, YOU ARE DIRECTED TO SEIZE AND DISPOSE OF THE DEFENDANT REAL PROPERTY IN ACCORDANCE WITH FEDERAL LAW.

| | | | |
|---|---|----------------------------------|----------------------|
| Signature of Attorney other Originator requesting service on behalf of: <i>Mary McKen Houghton</i> | <input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT | TELEPHONE NUMBER 412-894-7370 | DATE May 23, 2006 |
|---|---|----------------------------------|----------------------|

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

| | | | | | |
|--|---|---------------------------------|--------------------------------|---|---|
| I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted) | Total Process | District of Origin No. _____ | District to Serve No. _____ | Signature of Authorized USMS Deputy or Clerk | Date |
| I hereby certify and return that <input checked="" type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input checked="" type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below. | | | | | |
| <input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below) | | | | | |
| Name and title of individual served (if not shown above) | | | | <input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode | |
| Address (complete only different than shown above) | | | | Date 10/12/06 Time 11:38 <input checked="" type="checkbox"/> am <input type="checkbox"/> pm Signature of U.S. Marshal or Deputy <i>[Signature]</i> | |
| Service Fee \$5.00 | Total Mileage Charges including endeavors | Forwarding Fee | Total Charges 45.00 | Advance Deposits | Amount owed to U.S. Marshal or Amount of Refund |

REMARKS: *END CASE 09-3-06 170 Pittsburgh 10/13/06/8am*
ASSET I.D. NUMBER: 98-FBI-001952
(mjp)

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED